



NO. 29

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Special Edition: 2016 Enrollment & Change Judicial Branch Employees

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2016 Enrollment and Change Period

The 2016 enrollment and change period is:

October 12 – November 23, 2015



This is the only time that you can make changes to your health insurance, dental insurance, flexible spending accounts or life insurance, unless you have a qualified life event during the year. Please use this enrollment and change period as an opportunity to review your benefits. More importantly, the 2016 enrollment and change period will be an **ACTIVE ENROLLMENT** for health, dental, and flexible spending accounts.

Active Enrollment

JUDICIAL BRANCH EMPLOYEES MUST RE-ENROLL IN HEALTH AND DENTAL COVERAGE DURING THE ENROLLMENT AND CHANGE PERIOD TO HAVE COVERAGE IN 2016:

Employees make benefit elections in **IOWABENEFITS** (<https://bfi.secure-enroll.com/go/stateofiowa>).

To participate in the Health Flexible Spending Account (FSA) and/or the Dependent Care FSA, employees must enroll each year in IowaBenefits.

IowaBenefits

You can make the following benefit elections and changes in IowaBenefits (<https://bfi.secure-enroll.com/go/stateofiowa>).

- Health insurance
- Dental insurance
- Flexible Spending Accounts
- Life insurance
- Life insurance beneficiary designations

IowaBenefits Username and Password

IowaBenefits requires a username and password.

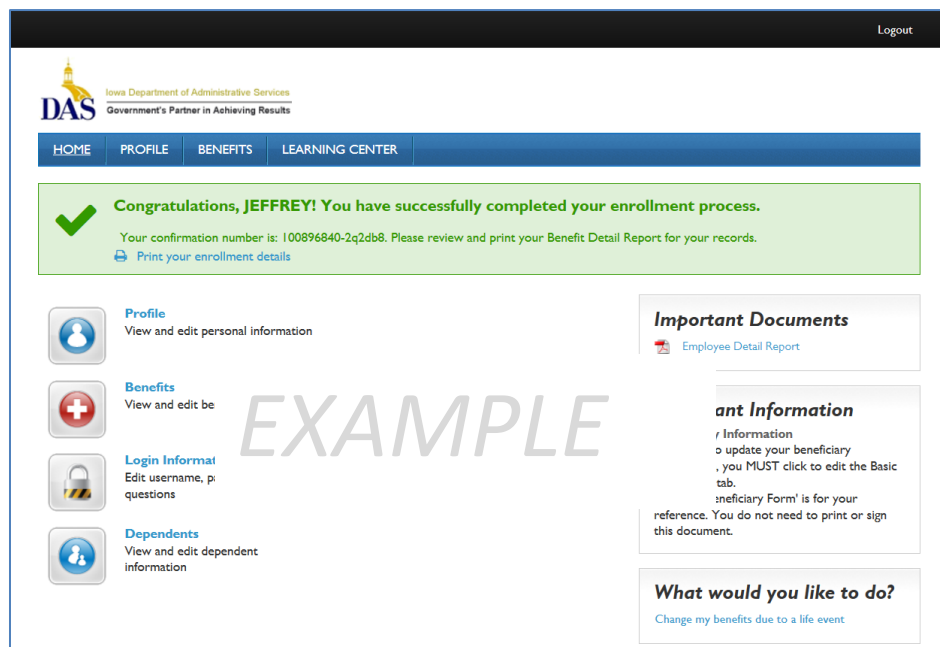
- If this will be the first time you access IowaBenefits, you will need to create a username and password. Step-by-step instructions in creating a username and/or password are available at the DAS Benefits website (<https://das.iowa.gov/human-resources/employee-and-retiree-benefits/>)
- You can also call IowaBenefits technical assistance at **866.415.7872** (Monday - Friday, 7 a.m. to 5 p.m.) if you need your Login ID or if you have trouble using this system.

If you know your IowaBenefits username and password, you do not need to change your username and password.

Enrolling in Benefits in IowaBenefits

Once you have logged into IowaBenefits, you will go through a series of screens.

- Make sure that you are on the “Open Enrollment Benefits” tab and click on the “Get Started” button for 2016 medical.
- First, you will be taken to medical screens. Click on the medical plan you want or decline coverage. If you want family coverage, add the dependents you want covered. Once you have made your selection, scroll down the page and click the “Save” button.
- Once you save your medical election, you will click the “Get Started” button to begin dental enrollment. You will select dental insurance or decline coverage. If you want family coverage, add the dependents you want covered. Once you have made your selection, scroll down the screen and click the “Save” button.
- Once you save the dental enrollment, IowaBenefits will display the “Get Started” button for 2016 Flexible Spending (FSA). Regardless of whether or not you want to participate, you must either enroll or decline FSA before you will see the confirmation screen.
- Once you have enrolled or declined FSA benefits and saved those actions, IowaBenefits will display the confirmation screen as shown below.



If you do not see this page, you have NOT saved your choices and are NOT enrolled in benefits.

IowaBenefits and Social Security Numbers



When you are in IowaBenefits, check that your spouse or domestic partner, and/or dependents' Social Security numbers are correct.

It is important that your covered family members' Social Security numbers are correct to meet the new health coverage reporting required by the Affordable Care Act. The State will be required to issue a statement to every employee about his or her previous year's health care coverage. You will need this information when filing your personal income tax return. The new provision requires us to report your health care coverage to the Internal Revenue Service (IRS). The IRS requires this information be reported using the Social Security numbers of the contract holder and each dependent covered under your health care coverage.

If the covered family members' Social Security numbers are missing or incorrect, **you may be assessed an IRS penalty (\$50 per violation).**

2016 Benefits Highlights

The benefits highlights for Judicial Branch employees are:

Open Dental Enrollment

Eligible employees can enroll in dental coverage, change to family or single coverage, add eligible family members to their dental insurance or remove eligible family members from their dental insurance.

Health Flexible Spending Account Increase

The maximum Health FSA contribution increases to **\$2,550** in 2016 from \$2,500 in 2015.

Blue Advantage

Blue Advantage will **NOT** be offered to Judicial Branch employees. Judicial Branch employees, enrolled in Blue Advantage, **must make a new plan selection** during this year's enrollment and change period.

Health Plan Premiums

AFSCME-covered and Non-Contract Employees

The employee contribution toward single coverage will be \$20 per month for Blue Access, Deductible 3 Plus, Iowa Select and Program 3 Plus. The employee contribution toward Blue Access family coverage will also be \$20 per month. For the other plans, the formula for the contribution mix remains the same as in previous years.

PPME-covered Employees

The employee contribution toward single coverage will remain \$0.00 per month for Blue Access, Iowa Select and Program 3 Plus. The employee contribution toward Blue Access family coverage will also be \$0.00 per month. For Iowa Select and Program 3 Plus, the formula for the contribution mix for family coverage remains the same as in previous years.

Blue Access – Change in Coinsurance

A 10 percent coinsurance will be applied to services that do not currently require copays. Examples of services that will require the 10 percent coinsurance are inpatient hospital services, outpatient hospital services, ambulance and urgent care centers.

Iowa Select, and Program 3 Plus – Increase in the Out-Of-Pocket Maximum

The medical maximum out-of-pocket increases to:

- **\$650** from \$600 for single coverage
- **\$1,450** from \$800 for family coverage

Iowa Select and Program 3 Plus – Increase in the Prescription Drug Out-Of-Pocket Maximum

The prescription drug maximum out-of-pocket increases to:

- **\$500** from \$250 for single coverage
- **\$1,000** from \$500 for family coverage

Preventive Services Covered at No Copay, Coinsurance, or Deductible

Due to the changes in the health insurance plans' designs and premiums, the health plans will comply with the provisions of the Affordable Care Act (ACA) beginning in 2016. The health plans offered to Judicial Branch employees will provide preventive services at no coinsurance, copay or deductible and will cover some services that were not covered under the health insurance plans offered in 2015.

Blue Access – Maximum Out-Of-Pocket for Prescription Drugs

An ACA-required provision is that Blue Access has an annual out-of-pocket maximum for prescription drugs. In 2016, the out-of-pocket maximum is \$5,850 for single coverage and \$11,700 for family coverage.

Benefit Elections during the Enrollment and Change Period

Following are the benefit actions Judicial Branch can take during the 2016 enrollment and change period.

Health Insurance

- Enroll in a health insurance plan, if not currently enrolled
- Change health insurance plan
- Change the contract holder in a double spouse family contract
- Add or remove eligible family members from health insurance
- Cancel health insurance coverage

Dental Insurance

- Enroll in dental insurance if not currently enrolled
- Change the contract holder in a double spouse family contract
- Add or remove eligible family members from dental insurance
- Cancel dental insurance coverage

Flexible Spending Accounts

- Enroll in the Health Flexible Spending Account and elect up to a maximum of \$2,550 in 2016
- Enroll in the Dependent Care Flexible Spending Account and elect up to \$5,000 if married and filing a joint tax return, or \$2,500 if married and filing a separate tax return for 2016

Supplemental Life Insurance

- Apply to increase the amount of supplemental life insurance to the maximum per contract status. Evidence of insurability must be provided to and approved by The Hartford before the increased coverage can go into effect. Increases will be effective the first of the month after DAS receives approval from The Hartford.

Premium Conversion

- Change whether the premiums for health, dental and supplemental life insurance are taken pre-tax (before Federal, State and FICA tax) or post-tax (after Federal, State and FICA tax).

Effective Date

Benefit elections made during the enrollment and change period are **effective January 1, 2016**. Increases to supplemental life coverage will be effective the first of the month after DAS receives The Hartford's approval.

Benefit Eligibility

If you work 20 hours a week or more, you are eligible to participate in and make changes to health insurance, dental insurance, flexible spending accounts, and the premium conversion plan. If you work 30 hours a week, you can also make changes to your supplemental life insurance during the 2016 enrollment and change period.

Family Members Eligible for Coverage

Dependents eligible for health and dental insurance coverage are:

- Your spouse defined as a husband or wife as the result of a marriage that is legally recognized in Iowa. This does not include a spouse from whom you are legally separated or divorced.
- Your domestic partner (same sex or opposite sex)
- Your dependent children

Coverage of Dependent Children

An eligible dependent child may be covered under your health and dental insurance through the end of the year in which they turn age 26. The following are all eligible dependents.

- A child, under the age of 27, can:

- Be a student or a non-student
- Live in Iowa or outside of Iowa
- Be unmarried or married (A dependent's spouse is not eligible for coverage.)
- An unmarried, full-time student in an accredited institution of postsecondary education, regardless of age.
- An unmarried child who is totally and permanently disabled, physically or mentally, regardless of age. (The disability must have existed before the dependent child turned age 27 or while a full-time student.)

Verification of Full-Time Students over Age 26

You will need to provide documentation that your unmarried full-time student over the age of 26 is a full-time student in 2016.

If you have an unmarried full-time student over the age of 26 covered on your health and dental plans, your human resources associate will provide you with a **Certification of Full-Time Student Status** form (https://das.iowa.gov/sites/default/files/hr/benefits/forms/552-0729_certification_full-time_student.doc). In addition to verifying that your dependent is unmarried, you must provide a copy of your dependent's most recent semester/quarter transcript or class schedule to confirm his or her full-time student status. The form and documentation must be returned prior to the end of the enrollment and change period.

It is important that you respond to this verification request. Failure to return the verification form will mean that coverage for your dependent will be removed from your plan on December 31, 2015. You will not be able to add coverage for this dependent until the 2017 enrollment and change period, unless there is a qualified life event affecting the coverage for this dependent.

When adding a full-time student over age 26, the above documentation must be received before coverage can be effective.

If you have questions about the verification process, contact Marsha Webb at 515.281.8989 or e-mail marsha.webb@iowa.gov.

Health Insurance

Judicial Branch employees can choose one of the following health plans for 2016.

- Blue Access
- Iowa Select
- Program 3 Plus

Side-by-Side Comparisons

A side-by-side summary of the benefits between the health insurance plans is available at the DAS 2016 Enrollment and Change Period website (<https://das.iowa.gov/human-resources/employee-and-retiree-benefits/2016-enrollment-and-change>). 2016 benefit changes are indicated in **red**.

If you have questions about a specific health service, contact Wellmark's customer service dedicated exclusively to the State at **800.622.0043**.

Preventive Services

All of the health plans comply with the provisions of the Affordable Care Act (ACA).

Since the plans are ACA-compliant, **preventive care benefits are available with no cost-sharing requirements** (no deductible, no copayment or coinsurance).

The list of preventive services available with no cost sharing is lengthy. The list is available at [HealthCare.gov](https://www.healthcare.gov/preventive-care-benefits/) (<https://www.healthcare.gov/preventive-care-benefits/>).

Important
Information

- Only preventive services received from a Wellmark network provider will be covered at 100% with no member cost share.
- Your health care provider's office may bill a visit separately from your preventive services. If this is the case, you might have a copay or coinsurance.
- You might also have to pay if the primary reason for your appointment is something other than preventive care.
- You will have to pay out-of-pocket for treatments and follow-up appointments with your doctor if those screenings reveal a problem.
- While your doctor should have a general idea of which preventive screenings and services fall under the no cost-sharing requirement, you can also call Wellmark's customer service unit at 800.622.0043.

Out-of-Pocket Maximum

The health plan's out-of-pocket maximum is the point where Wellmark pays 100 percent of the eligible medical claims. The out-of-pocket maximum provides you and your family financial protection against large, catastrophic medical claims.

The out-of-pocket maximum will increase for **Iowa Select** and **Deductible 3 Plus** in 2016. (The out-of-pocket maximum did not increase for Blue Access.)

The out-of-pocket maximum includes:

- Deductible
- Coinsurance
- Copayments

The out-of-pocket maximum does not include:

- Premiums paid
- Services not covered in the State's plan

Let's look at an example ...

- Jack is an UE/IUP-covered employee enrolled in **Iowa Select, family coverage**.
- Jack covers Jill, his wife, and Polly, his daughter.
- Beginning in 2016, the Iowa Select benefit design for UE/IUP-covered employees is:
 - **Deductible** – \$250 for single coverage, \$500 for family coverage (The deductible applies to both inpatient and outpatient services.)
 - **Office visit** - \$15 copay
 - **Coinsurance** – 10 percent (in-network), 20 percent (out-of-network)
 - **Out-Of-Pocket Maximum (OOP)** - \$1,450 for family coverage
- Jack and his family went to health care providers belonging to the Wellmark network.

Service	Employee Payment	Total Amount toward OOP Max
Jill has an office visit with her health care provider and lab work (\$150) done in the provider's office. Jill is responsible for the \$15 copay for the office visit and 10 percent coinsurance for the lab work.	\$30 \$15 + (\$150 * 10%)	\$30
Jack has an office visit with his health care provider, and he is responsible for a \$15 copay.	\$15	\$45

Polly had an accident and goes to an Urgent Care Center. The bill for the Urgent Care Center was \$750. Jack is responsible for the single deductible of \$250, plus 10 percent of the charge.	\$300 \$250 + (\$500 * 10%)	\$345
Jack has four visits to the chiropractor, and he is responsible for \$15 copays for each visit.	\$60 (\$15 * 4)	\$405
As a result of Polly's accident, she had five outpatient physical therapy visits. The charge for each visit was \$300. Jack is responsible for 10 percent of the charge. (Polly has already met the deductible with her visit to the Urgent Care Center.)	\$150 \$300 per visit * 10% = \$30 \$30 * 5 visits = \$150	\$555
Jill goes into the hospital. The hospital bill is \$15,000. Jill has a \$250 deductible plus 10 percent coinsurance up to the \$1,450 out-of-pocket maximum. In this case, Jack's responsibility is \$895 because this will bring him to the family out-of-pocket maximum of \$1,450 (\$1,450 - \$555). The hospital will not bill him for any covered services over this amount.	\$895	\$1,450

At this point, Wellmark will pick up any future claims for this calendar year for Jack and his family.

2016 Monthly Health Insurance Premiums for Full-Time Employees

Judicial Branch AFSCME-covered and Non-Contract Employees

	Monthly Premium	State Share	%	Employee Share	%
Blue Access					
Single	\$619.10	599.10	97%	\$20.00	3%
Family	\$1,453.20	\$1,433.20	99%	\$20.00	1%
Double Spouse – Contract Holder	\$726.60	\$706.60	97%	\$20.00	3%
Double Spouse – Contributing Spouse	\$726.60	\$726.60	100%	\$0	0%
Iowa Select					
Single	\$847.04	\$827.04	98%	\$20.00	2%
Family	\$1,986.69	\$1,688.77	85%	\$297.92	15%
Double Spouse – Contract Holder	\$993.35	\$973.35	98%	\$20.00	2%
Double Spouse – Contributing Spouse	\$993.35	\$993.35	100%	\$0	0%
Program 3 Plus					
Single	\$849.66	\$829.66	98%	\$20.00	2%
Family	\$1,992.81	\$1,688.77	85%	\$304.04	15%
Double Spouse – Contract Holder	\$996.41	\$976.41	98%	\$20.00	2%
Double Spouse – Contributing Spouse	\$996.41	\$996.41	100%	\$0	0%

Judicial Branch PPME-covered Employees

	Monthly Premium	State Share	%	Employee Share	%
Blue Access					
Single	\$619.10	\$619.10	100%	\$0	0%
Family	\$1,453.20	\$1,453.20	100%	\$0	0%
Double Spouse – Contract Holder	\$726.60	\$726.60	100%	\$0.00	0%
Double Spouse – Contributing Spouse	\$726.60	\$726.60	100%	\$0.00	0%

Iowa Select					
Single	\$847.04	\$847.04	100%	\$0	0%
Family	\$1,986.69	\$1,688.77	85%	\$297.92	15%
Double Spouse – Contract Holder	\$993.35	\$993.35	100%	\$0.00	0%
Double Spouse – Contributing Spouse	\$993.35	\$993.35	100%	\$0.00	0%
Program 3 Plus					
Single	\$849.66	\$849.66	100%	\$0	0%
Family	\$1,922.81	\$1,688.77	89%	\$304.04	11%
Double Spouse – Contract Holder	\$996.41	\$996.41	100%	\$0.00	0%
Double Spouse – Contributing Spouse	\$996.41	\$996.41	100%	\$0.00	0%

(Ask your human resources associate for part-time premiums.)

Double Spouse Family Insurance Contract

If you and your spouse are both employees of the State of Iowa, you have the option of enrolling in the double spouse family insurance contract. The double spouse family insurance contract is one family health insurance plan with the total premium being split between each spouse rather than paid by just one. With the double spouse family insurance contract, one employee is considered the contract holder and the other spouse is a dependent under the contract holder's health insurance plan.

Judicial Branch Employees

If the health insurance contract holder is an AFSCME-covered or Non-Contract Judicial employee, the contract holder will contribute the **total of \$20** per month for health insurance. The contributing spouse will not contribute toward the coverage.

Judicial Branch Employees	State Contribution	Employee Contribution
Contract Holder	One-half of the total monthly premium minus \$20	\$20 per month
Contributing Spouse	One-half of the total monthly premium	\$0 per month



Contact your human resources associate before making any changes to your double spouse family contract.

Dental Insurance

The 2016 enrollment and change period is an open dental enrollment period.

During the open dental enrollment and change period, you can:

- Enroll in dental insurance, if not currently enrolled in dental insurance
- Change from family to single coverage
- Change from single to family coverage
- Add or remove eligible family members from your coverage

Your dental elections will be effective January 1, 2016.

2016 Monthly Dental Insurance Premiums

Judicial Branch Employees

Delta Dental	Monthly Premium	State Share	%	Employee Share	%
Single	\$29.13	\$29.13	100%	\$0.00	0%
Family	\$78.29	\$39.15	50%	\$39.14	50%
Double Spouse – Contractor Holder	\$39.15	\$29.13	74%	\$10.02	26%
Double Spouse – Contributing Spouse	\$39.15	\$29.13	74%	\$10.02	26%

Flexible Spending Accounts

Flexible Spending Accounts (FSAs) allow you to set aside pretax dollars to reimburse you for eligible health or dependent care expenses.

When you enroll in a Flexible Spending Account, you decide how much to contribute to each account for calendar year 2016. The money is then deducted from your paycheck pre-tax (before Federal and State income taxes and FICA taxes are deducted) in equal amounts over the course of the year. After you incur expenses that qualify for reimbursement, you submit claims (reimbursement requests) to ASIFlex (the administrator of the program) to request tax-free withdrawals from your Flexible Spending Account to reimburse yourself for these expenses.

You may elect to have your reimbursement placed directly into your checking or savings account by adding direct deposit information into IowaBenefits when you enroll.

Judicial Branch Employees

With the health plan design changes in 2016, you may want to look at enrolling or increasing your annual election in the Health Flexible Spending Account.

Health FSA

With the Health FSA, certain health care expenses for you and your eligible family members can be reimbursed. Medical expenses eligible for reimbursement include most medically necessary health care expenses that are not paid through medical or dental insurance plans. *Your share of health and dental insurance premiums are not eligible to be reimbursed from the Health FSA. Premiums are already made with pretax dollars.*

Maximum Annual FSA Elections

NEW! The maximum annual Health FSA contribution is **\$2,550** per plan year.

No more use it or lose it!

Up to \$500 of unused health FSA amounts remaining at the end of 2016, can be carried over to reimburse medical expenses incurred during the entire calendar year of 2017.

The carryover will not reduce your 2016 election. The carryover of up to \$500 is in addition to the State's plan limit of \$2,550. You can carry over up to \$500 of unused funds for a total of \$3,050 to be used for calendar year 2016 expenses.

A great provision of this change is that you do not have to enroll in the next year in order to use the \$500 carryover! You do have to be employed in 2017, but do not have to enroll in the health flex plan to use your carryover dollars.

Dependent Care FSA

The Dependent Care FSA reimburses you for qualified dependent care expenses necessary for you to work, or if you are married, for you and your spouse to work. Expenses eligible for reimbursement up to the annual maximum limit include:

- Care of dependent children under age 13
- Care of adult disabled dependents

Maximum Annual FSA Elections


The maximum annual Dependent Care FSA contribution is \$5,000 per household (\$2,500 if you are married and file a separate tax return).

Grace Period

The grace period for the dependent care FSA allows you to incur eligible expenses in the year after the plan year ends, through March 15 of the second year. For instance, if your 2016 dependent care FSA is \$5,000 and you incur claims totaling \$4,400 in 2016, you can incur claims for \$600 from January 1, 2017 – March 15, 2017 and be reimbursed from your 2016 dependent care FSA.

Enrolling in Flexible Spending Accounts

To participate in either or both of the flexible spending accounts, you must enroll each year in IowaBenefits.

 If you are currently enrolled and are enrolling for 2016, please check your existing deposit information in IowaBenefits for accuracy.

Life Insurance

The State of Iowa's life insurance plan provides your family financial protection in the case of your death. Each year, you can make changes to your supplemental life insurance coverage during the enrollment and change period.

Basic Life Insurance

The State pays 100 percent of the premium for basic life and accidental death and dismemberment (AD&D) insurance. The amount of coverage is:

Eligible Employees	Basic Life Insurance *
Judicial Branch Employees	\$20,000

* Age reductions apply beginning at age 65

Supplemental Life Insurance

In addition to the basic life insurance coverage, you have an opportunity to elect supplemental term life insurance at group rates. The maximum amount of supplemental life insurance that you may purchase depends upon your bargaining status.

Eligible Employees	Supplemental Life Insurance Available*	
	Minimum Amount	Maximum Amount
Judicial Branch Employees	\$5,000	\$100,000

* Age reductions apply beginning at age 65

Changing Supplemental Life Insurance

During the enrollment and change period, you can request to increase, decrease, or cancel your supplemental life insurance coverage. You can purchase additional life insurance from the minimum amount to the maximum amount of coverage based on your bargaining status. Any increases to supplemental life coverage must be approved by The Hartford. Decreases or cancellations do not require approval and are effective January 1, 2016.

2016 Enrollment and Change Presentations

During the enrollment and change period, a total of **20** (webcasts and on-site) presentations have been scheduled. You can see the dates and times of the presentations at the DAS Benefits >Benefits Education> Benefits Education Calendar website (<https://das.iowa.gov/event-calendar-date>).